

UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Date: July 28, 2005

MARINE, JON C. et al.

Serial No. : 10/672,957

Our File No. MAT.315

Filed : September 25, 2003

For : ANIMATED MULTI-PERSONA TOY

United States Patent and Trademark Office
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

**REQUEST TO FORWARD PRIORITY DOCUMENT TO THE
INTERNATIONAL BUREAU**

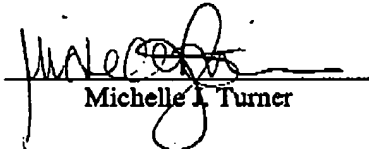
Applicants received a communication from our European associates who are prosecuting the European national phase for this matter. In the communication, associates advised that the USPTO has not forwarded the above-identified application, which was a priority document under Box VI, Item (3) of the PCT Request (copy attached), to the International Bureau. Applicants request that such priority document be forwarded at its earliest convenience so that the European patent application may issue. Please contact applicants' undersigned attorney with any questions or comments.

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Page 1 - REQUEST TO FORWARD PRIORITY DOCUMENT TO...
Application Serial No. 10/672,957


CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, to facsimile number: 703-308-7048 on July 28, 2005.


Michelle J. Turner

Respectfully submitted,

KOLISCH HARTWELL, P.C.


Peter D. Sabido
Registration No. 50,353
Customer No. 23581
Attorney for Applicants
520 S.W. Yamhill Street, Suite 200
Portland, Oregon 97204
Telephone: (503) 224-6655
Facsimile: (503) 295-6679

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference
(if desired) (12 characters maximum) MAT 315A**Box No. I TITLE OF INVENTION**
ANIMATED MULTI-PERSONA TOY**Box No. II APPLICANT** ☐ This person is also inventor

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

Mattel, Inc.
333 Continental Boulevard
El Segundo, California 90245
United States

Telephone No.

Facsimile No.

Teleprinter No.

Applicant's registration No. with the Office

State (that is, country) of nationality:

United States

State (that is, country) of residence:

United States

This person is applicant
for the purposes of:all designated
Statesall designated States except
the United States of Americathe United States
of America onlythe States indicated in
the Supplemental Box**Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)**

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

MARINE, JON C.
1349 Manzanita Drive
Fullerton, California 92831
United States

This person is:



applicant only



applicant and inventor

inventor only (if this check-box
is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

United States

State (that is, country) of residence:

United States

This person is applicant
for the purposes of:all designated
Statesall designated States except
the United States of Americathe United States
of America onlythe States indicated in
the Supplemental Box☒ Further applicants and/or (further) inventors are indicated on a continuation sheet.**Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE**The person identified below is hereby/has been appointed to act on behalf
of the applicant(s) before the competent International Authorities as:

agent

common
representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

DeVoe, Charles H.
Sabido, Peter D.
Kolisch Hartwell, P.C.
620 S.W. Yamhill Street, Suite 200
Portland, Oregon 97204
United States

Telephone No.

(503) 224-6655

Facsimile No.

(503) 295-6679

Teleprinter No.

Agent's registration No. with the Office

37,305; 50,353

☐ Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Form PCT/RO/101 (first sheet) (March 2001; reprint July 2003)

See Notes to the request form

Sheet No. ... 2 ...

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
If none of the following sub-boxes is used, this sheet should not be included in the request.	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) MCGRATH, TARA 2923 Manhattan Avenue Hermosa Beach, California 90254 United States	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: United States	State (that is, country) of residence: United States
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) MESCH, JOYCE 1111 Flagler Lane Redondo Beach, California 90278 United States	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: United States	State (that is, country) of residence: United States
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) GRAY, KEVIN W. 1484 Fordham Avenue Thousand Oaks, California 91360 United States	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: United States	State (that is, country) of residence: United States
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) CHOI, OK-SOO 1059 South St. Andrews Place Los Angeles, California 90019 United States	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: United States	State (that is, country) of residence: United States
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.	

Form PCT/RO/101 (continuation sheet) (March 2001; reprint July 2003)

See Notes to the request form

Sheet No. 3

Box No. V DESIGNATION OF STATES

Mark the applicable check-boxes below; at least one must be marked.

The following designations are hereby made under Rule 4.9(a):

Regional Patent

- ☒ **AP** ARIPO Patent: GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, MZ Mozambique, SD Sudan, SL Sierra Leone, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZM Zambia, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT (If other kind of protection or treatment desired, specify on dotted line)
- ☒ **EA** Eurasian Patent: AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT
- ☒ **EP** European Patent: AT Austria, BE Belgium, BG Bulgaria, CH & LI Switzerland and Liechtenstein, CY Cyprus, CZ Czech Republic, DE Germany, DK Denmark, EE Estonia, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, HU Hungary, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, RO Romania, SE Sweden, SI Slovenia, SK Slovakia, TR Turkey, and any other State which is a Contracting State of the European Patent Convention and of the PCT
- ☒ **OA** OAPI Patent: BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GQ Equatorial Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (If other kind of protection or treatment desired, specify on dotted line)

National Patent (If other kind of protection or treatment desired, specify on dotted line):

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> AE United Arab Emirates | <input checked="" type="checkbox"/> HR Croatia | <input checked="" type="checkbox"/> OM Oman |
| <input checked="" type="checkbox"/> AG Antigua and Barbuda | <input checked="" type="checkbox"/> HU Hungary | <input checked="" type="checkbox"/> PG Papua New Guinea |
| <input checked="" type="checkbox"/> AL Albania | <input checked="" type="checkbox"/> ID Indonesia | <input checked="" type="checkbox"/> PH Philippines |
| <input checked="" type="checkbox"/> AM Armenia | <input checked="" type="checkbox"/> IL Israel | <input checked="" type="checkbox"/> PL Poland |
| <input checked="" type="checkbox"/> AT Austria | <input checked="" type="checkbox"/> IN India | <input checked="" type="checkbox"/> PT Portugal |
| <input checked="" type="checkbox"/> AU Australia | <input checked="" type="checkbox"/> IS Iceland | <input checked="" type="checkbox"/> RO Romania |
| <input checked="" type="checkbox"/> AZ Azerbaijan | <input checked="" type="checkbox"/> JP Japan | <input checked="" type="checkbox"/> RU Russian Federation |
| <input checked="" type="checkbox"/> BA Bosnia and Herzegovina | <input checked="" type="checkbox"/> KE Kenya | <input checked="" type="checkbox"/> SC Seychelles |
| <input checked="" type="checkbox"/> BB Barbados | <input checked="" type="checkbox"/> KG Kyrgyzstan | <input checked="" type="checkbox"/> SD Sudan |
| <input checked="" type="checkbox"/> BG Bulgaria | <input checked="" type="checkbox"/> KP Democratic People's Republic of Korea | <input checked="" type="checkbox"/> SE Sweden |
| <input checked="" type="checkbox"/> BR Brazil | <input checked="" type="checkbox"/> KR Republic of Korea | <input checked="" type="checkbox"/> SG Singapore |
| <input checked="" type="checkbox"/> BY Belarus | <input checked="" type="checkbox"/> KZ Kazakhstan | <input checked="" type="checkbox"/> SK Slovakia |
| <input checked="" type="checkbox"/> BZ Belize | <input checked="" type="checkbox"/> LC Saint Lucia | <input checked="" type="checkbox"/> SL Sierra Leone |
| <input checked="" type="checkbox"/> CA Canada | <input checked="" type="checkbox"/> LK Sri Lanka | <input checked="" type="checkbox"/> SY Syrian Arab Republic |
| <input checked="" type="checkbox"/> CH & LI Switzerland and Liechtenstein | <input checked="" type="checkbox"/> LR Liberia | <input checked="" type="checkbox"/> TJ Tajikistan |
| <input checked="" type="checkbox"/> CN China | <input checked="" type="checkbox"/> LS Lesotho | <input checked="" type="checkbox"/> TM Turkmenistan |
| <input checked="" type="checkbox"/> CO Colombia | <input checked="" type="checkbox"/> LT Lithuania | <input checked="" type="checkbox"/> TN Tunisia |
| <input checked="" type="checkbox"/> CR Costa Rica | <input checked="" type="checkbox"/> LU Luxembourg | <input checked="" type="checkbox"/> TR Turkey |
| <input checked="" type="checkbox"/> CU Cuba | <input checked="" type="checkbox"/> LV Latvia | <input checked="" type="checkbox"/> TT Trinidad and Tobago |
| <input checked="" type="checkbox"/> CZ Czech Republic | <input checked="" type="checkbox"/> MA Morocco | <input checked="" type="checkbox"/> TZ United Republic of Tanzania |
| <input checked="" type="checkbox"/> DE Germany | <input checked="" type="checkbox"/> MD Republic of Moldova | <input checked="" type="checkbox"/> UA Ukraine |
| <input checked="" type="checkbox"/> DK Denmark | <input checked="" type="checkbox"/> MG Madagascar | <input checked="" type="checkbox"/> UG Uganda |
| <input checked="" type="checkbox"/> DM Dominica | <input checked="" type="checkbox"/> MK The former Yugoslav Republic of Macedonia | <input checked="" type="checkbox"/> US United States of America |
| <input checked="" type="checkbox"/> DZ Algeria | <input checked="" type="checkbox"/> MN Mongolia | <input checked="" type="checkbox"/> UZ Uzbekistan |
| <input checked="" type="checkbox"/> EC Ecuador | <input checked="" type="checkbox"/> MW Malawi | <input checked="" type="checkbox"/> VC Saint Vincent and the Grenadines |
| <input checked="" type="checkbox"/> EE Estonia | <input checked="" type="checkbox"/> MX Mexico | <input checked="" type="checkbox"/> VN Viet Nam |
| <input checked="" type="checkbox"/> ES Spain | <input checked="" type="checkbox"/> MZ Mozambique | <input checked="" type="checkbox"/> YU Serbia and Montenegro |
| <input checked="" type="checkbox"/> FI Finland | <input checked="" type="checkbox"/> NI Nicaragua | <input checked="" type="checkbox"/> ZA South Africa |
| <input checked="" type="checkbox"/> GB United Kingdom | <input checked="" type="checkbox"/> NO Norway | <input checked="" type="checkbox"/> ZM Zambia |
| <input checked="" type="checkbox"/> GD Grenada | <input checked="" type="checkbox"/> NZ New Zealand | <input checked="" type="checkbox"/> ZW Zimbabwe |
| <input checked="" type="checkbox"/> GE Georgia | | |
| <input checked="" type="checkbox"/> GH Ghana | | |
| <input checked="" type="checkbox"/> GM Gambia | | |

Check-boxes below reserved for designating States which have become party to the PCT after issuance of this sheet:

☒ All states not listed ☐ ☐

Precautionary Designation Statement: In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation (including fees) must reach the receiving Office within the 15-month time limit.)

Sheet No. 4

Box No. VI PRIORITY CLAIM

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country or Member of WTO	regional application:* regional Office	international application: receiving Office
item (1) 27 September 2002	60/414,128	US		
item (2) 31 October 2002	60/423,237	US		
item (3) 25 September 2003	Unknown	US		
item (4)				
item (5)				

☐ Further priority claims are indicated in the Supplemental Box.

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of this International application is the receiving Office) identified above as:

☒ all items ☐ item (1) ☐ item (2) ☐ item (3) ☐ item (4) ☐ item (5) ☐ other, see Supplemental Box

* Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(iv)):

Box No. VII INTERNATIONAL SEARCHING AUTHORITY

Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):

ISA / USRO

Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):

Date (day/month/year)

Number

Country (or regional Office)

Box No. VIII DECLARATIONS

The following declarations are contained in Boxes Nos. VIII (i) to (v) (mark the applicable check-boxes below and indicate in the right column the number of each type of declaration):

Number of
declarations

- ☐ Box No. VIII (i) Declaration as to the identity of the inventor :
- ☐ Box No. VIII (ii) Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent :
- ☐ Box No. VIII (iii) Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application :
- ☐ Box No. VIII (iv) Declaration of inventorship (only for the purposes of the designation of the United States of America) :
- ☐ Box No. VIII (v) Declaration as to non-prejudicial disclosures or exceptions to lack of novelty :

Sheet No. 5

Box No. IX CHECK LIST: LANGUAGE OF FILING

This international application contains:		This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):		Number of items
(a) In paper form, the following number of sheets:		1. <input checked="" type="checkbox"/> fee calculation sheet		
request (including declaration sheets)	5	2. <input type="checkbox"/> original separate power of attorney		
description (excluding sequence listings and/or tables related thereto)	9	3. <input type="checkbox"/> original general power of attorney		
claims	13	4. <input type="checkbox"/> copy of general power of attorney; reference number, if any:		
abstract	1	5. <input type="checkbox"/> statement explaining lack of signature		
drawings	5	6. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s):		
Sub-total number of sheets	33	7. <input type="checkbox"/> translation of international application into (language):		
sequence listings		8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material		
tables related thereto		9. <input type="checkbox"/> sequence listings in computer readable form (indicate type and number of carriers)		
(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)		
Total number of sheets	33	(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter		
(b) <input type="checkbox"/> only in computer readable form (Section 801(a)(i))		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listings mentioned in left column		
(i) <input type="checkbox"/> sequence listings		10. <input type="checkbox"/> tables in computer readable form related to sequence listings (indicate type and number of carriers)		
(ii) <input type="checkbox"/> tables related thereto		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)		
(c) <input type="checkbox"/> also in computer readable form (Section 801(a)(ii))		(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater)		
(i) <input type="checkbox"/> sequence listings		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column		
(ii) <input type="checkbox"/> tables related thereto		11. <input checked="" type="checkbox"/> other (specify): check in the amount of USD 1,782.00		
Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the				
<input type="checkbox"/> sequence listings:				
<input type="checkbox"/> tables related thereto:				
(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)				

Figure of the drawings which should accompany the abstract:

1

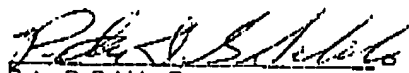
Language of filing of the international application:

English

Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

KOLISCH HARTWELL, P.C.



Dated: 26 September 2003

Peter D. Sabido, Reg. No. 50,353

For receiving Office use only

1. Date of actual receipt of the purported international application:	2. Drawings: <input type="checkbox"/> received: <input type="checkbox"/> not received:
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:	
4. Date of timely receipt of the required corrections under PCT Article 1(2):	
5. International Searching Authority (if two or more are competent): ISA /	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid

For International Bureau use only

Date of receipt of the record copy by the International Bureau:

This sheet is not part of and does not count as a sheet of the international application.

PCT

FEE CALCULATION SHEET
Annex to the Request

For receiving Office use only

International Application No.

Applicant's or agent's
file reference

MAT 315A

Date stamp of the receiving Office

Applicant

Mattel, Inc. et al.

CALCULATION OF PRESCRIBED FEES

1. TRANSMITTAL FEE 240.00 ☐ T

2. SEARCH FEE 450.00 ☐ S

International search to be carried out by USRO
(If two or more International Searching Authorities are competent to carry out the international search, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FEE

Basic Fee

Where items (b) and/or (c) of Box No. IX apply, enter Sub-total number of sheets } 33
Where items (b) and (c) of Box No. IX do not apply, enter Total number of sheets }

☐ b1 first 30 sheets 476.00 ☐ b1

☐ b2 3 x 12.00 = 36.00 ☐ b2
number of sheets in excess of 30 fee per sheet

☐ b3 additional component (only if sequence listings and/or tables related thereto are filed in computer readable form under Section 801(a)(i), or both in that form and on paper, under Section 801(a)(ii)):

400 x fee per sheet = ☐ b3

Add amounts entered at b1, b2 and b3 and enter total at B 512.00 ☐ B

Designation Fees

The international application contains 95 designations.

5 x 104.00 = 520.00 ☐ D
number of designation fees payable (maximum 5) amount of designation fee

Add amounts entered at B and D and enter total at I 1,032.00 ☐ I

(Applicants from certain States are entitled to a reduction of 75% of the international fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the sum of the amounts entered at B and D.)

4. FEE FOR PRIORITY DOCUMENT (if applicable) 60.00 ☐ P

5. TOTAL FEES PAYABLE USD 1,782.00

Add amounts entered at T, S, I and P, and enter total in the TOTAL box

TOTAL

☐ The designation fees are not paid at this time.

MODE OF PAYMENT

☐ authorization to charge deposit account (see below) ☐ postal money order ☐ cash ☐ coupons
☒ cheque ☐ bank draft ☐ revenue stamps ☐ other (specify):

AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT
(This mode of payment may not be available at all receiving Offices)

☐ Authorization to charge the total fees indicated above.
☒ (This check-box may be marked only if the conditions for deposit accounts of the receiving Office so permit) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.
☐ Authorization to charge the fee for priority document.

Receiving Office: RO/ USRO

Deposit Account No.: 11-1540

Date: 26 September 2003

Name: Peter D. Sabido

Signature: Peter D. Sabido



Kolisch Hartwell, P.C.
200 Pacific Building
520 S.W. Yamhill Street
Portland, Oregon 97204-1324
Telephone: (503) 224-6655
Facsimile: (503) 295-6679
260 Sheridan Avenue, Suite 200
Palo Alto, California 94306-2009
Telephone: (650) 325-8673
Facsimile: (650) 325-5076
e-mail: info@khpatent.com

FACSIMILE TRANSMITTAL COVER SHEET

DATE : July 28, 2005
OPERATOR : Michelle J. Turner

TO : USPTO

FACSIMILE NO. : (703) 308-7048

FROM : Peter Sabido

RE : Serial No. 10/672,957 filed September 25, 2003

OUR FILE : MAT.315

NO. OF PAGES : 9 (including cover sheet)

SPECIAL INSTRUCTIONS :

X ORIGINAL WILL NOT FOLLOW

ORIGINAL WILL FOLLOW BY:

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**IF YOU DID NOT RECEIVE EVERY PAGE, OR IF PAGES ARE UNCLEAR,
PLEASE CALL THE ABOVE-IDENTIFIED OPERATOR AT (503) 224-6655.**